

**Education and Young People’s Services**

**Early Help and**

**Preventative Services**

**Early Help and Preventative Services**

**Strategy and Three Year Plan**

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1. **Foreword**

In May 2014 we set out our strategy and vision for Early Help and Preventative Services (EHPS) and a new way of working in Kent. We have had a productive year since introducing the new model of working and we are pleased with the progress to date. The services which came together in April 2014 have been redesigned in order to deliver new ways of working and provide a firm foundation to improve the outcomes for children, young people and families in Kent. There is still more to be done and we are not complacent about the challenges ahead. There is now a well-founded and integrated structure from which to embed practice and align services to other key areas of service delivery for children and young people.

One year on from our initial prospectus, the priorities and vision remains the same; *“providing early help for whole families in a timely and responsive way, so that they are safeguarded, their educational, social and emotional needs are met and they achieve good outcomes“*. We have a continuous quest to get this right and to evidence that early help and preventative services work. Over the coming three years we will be embedding practice that makes a real difference, understanding what works and why, and evaluating the long term impact of early help and prevention. The fundamental purpose of early help is to improve the life chances of vulnerable children and families to benefit society at large whilst being cost effective. In a climate of reducing financial resources understanding the cost benefits and longer term impact is particularly important.

We continue to strive to deliver the highest quality services to make Kent a place of opportunity in which all families thrive. We endeavour to reduce the educational and health gaps for poorer and disadvantaged children and young people to ensure fewer numbers need interventions of the social care or youth justice system.

We are confident that our work in the past year to achieve good outcomes for children, young people and families in all aspects of their lives is having real benefits. We will work with partners to achieve more and this is one of the areas in which we want to have a stronger focus. We also aim to do more to ensure the greater participation of children, young people and parents.

This three year plan sets out our vision, ways of working and direction of travel for Kent’s Early Help and Preventative Services. The plan outlines what we aim to achieve and the ways we will be working over the next three years. It describes how EHPS will work with children, young people and their families to help them overcome difficulties and reach their full potential.

The three year plan is published in conjunction with the EHPS Manual which sets out in greater detail how the service is structured and organised across all elements of EHPS in Kent.

1. **Introduction**

The early years of a child’s life are critical for ensuring they develop well and they do not fall behind in a way which means they have poorer outcomes throughout life. The quality of the caring and learning environment experienced by a young child critically impacts on how well the brain develops and emotional resilience starts to develop. The lack of positive experience and nurturing can have long term detrimental impacts on cognitive and social-emotional outcomes.

While early development is critical, later stages of childhood and adolescence are also key periods in life when children and young people need nurturing and additional support to overcome barriers to success in life. We know, for example, that the biological changes and brain development that takes place in early adolescence is critical. Most children and young people develop well but those where there is material and emotional deprivation may suffer significant harm. This is evident in their self-esteem, their relationships and behaviour, in their health and in their learning and achievement. EHPS, working with our partners in Health and other agencies and in close cooperation with schools, is designed to provide early help and additional support to the children and young people at risk of poor outcomes and emotional and physical harm. The key target groups are those children, young people and families whose needs are just below the thresholds for Specialist Children’s Services (SCS).

Our greatest success will be to ensure that in future fewer of these children will need social care protection or to be taken into care, because they are receiving sufficient early help that their lives improve.

If we want to improve life chances and outcomes in adult life, early help and prevention, in the early years especially, and throughout childhood and adolescence are essential. The waste of human potential, the risk of further inter-generational deprivation and the cost to society are the key drivers for change. Long term unmet needs which result in significant mental ill health, substance misuse, family abuse and neglect, poor educational achievement, unemployment and criminal offending are too high a price for not investing in early help services.

Children get one chance in life and their futures should not be determined by their background or by disadvantages faced early in life. Poverty should not predestine children and young people to educational failure and poorer physical and mental health, and yet we know it so often does. Nearly all parents want to do the best for their children but some struggle with problems they have inherited or developed in their own lives. Where multiple problems exist, children have the least chance of doing well.

Our approach is to work with families to develop their resilience and increase their capacity to help themselves. Our focus is to increase the availability and impact of those positive things that have the greatest beneficial effect on children’s lives, such as good parenting, growing up in a household in employment, quality early childcare and learning, a good school, healthy eating, the development of emotional resilience, ambition for the future in learning and employment, help to achieve good qualifications and safe behaviours and healthy habits in adolescence and early adulthood. We are deliberately adopting a whole family approach, working with parents, children and young people and their schools, colleges and early years settings.

1. **What is Early Help and Prevention?**

EHPS are designed to respond early to tackle emerging issues for children, young people and families who are most at risk of developing problems and having poor outcomes. Early help and preventative work is not just about early childhood but also about preventing adolescents and young adults from developing problems.

Prevention refers to measures put in place to decrease the likelihood of problems emerging in the future. Work in Children’s Centres or Youth Hubs such as healthy lifestyle choices, encouraging immunisation, accident prevention or the importance of parent and baby bonding all work towards future wellbeing. Prevention can be undertaken alongside other interventions. For example a family may be working with statutory children services to address safeguarding issues of neglect. Alongside this the adolescent in the family can be receiving preventative support in a youth hub to build social skills that can assist with personal development and future employment.

Early Help refers to the support given at the earliest possible opportunity if problems do start to emerge or if there are identified potential risk and/or vulnerability factors that may impact on a child’s development. These can be familial or community factors and support work can be undertaken in universal settings such as schools as well as in the family home. Youth justice work also has a preventative approach and early restorative work is effective in reducing the likelihood of future offending.

The earlier children at high risk of difficulties, abuse or neglect receive assistance the greater the potential to decrease the risk of negative outcomes in later childhood adulthood. However there are sometimes occasions when things have gone wrong for families and statutory intervention by SCS is required. Kent EHPS also work with families who have received statutory intervention from SCS.

The continuing work will aim to help maintain positive changes that have been made or to address emerging issues for the family that do not impact on the safeguarding of the children in the family or indeed to build progress to reach even more ambitious achievements and outcomes. All work with families ensures that they are at the centre of support, that they build on their own strengths and build resilience to the life challenges or problems many families experience.

By providing a clear focus on early help and preventative work, delivered in a timely and effective way, to the children and young people who need it, we aim to ensure they can flourish and will not in future experience harmful long-term consequences.

EHPS are multi-disciplinary and multi-agency and are delivered in an integrated, joined up way to have maximum impact on improving outcomes, providing families with a more coordinated approach, achieving the most efficient use of resources and reducing demand for more costly services.

EHPS work with children, young people and their families with a primary focus on families with children and young people aged from pre-birth to eighteen. However a young person who is already engaged with EHPS may continue to be engaged with provision beyond his or her eighteenth birthday. In particular work may continue with vulnerable young people or those who have special educational needs and disabilities aged eighteen to twenty five, in order to help them make the transition to adulthood or access adult services. Work may also continue with young people in order to meet the statutory responsibilities around NEET. It is not likely that a new referral for a young person aged nineteen or above would be appropriate as adult services should meet this need.

All of our work is predicated on highly effective partnerships and good relationships with our schools, Health providers, the Police, Voluntary Sector providers and other key agencies and stakeholders, who are at the heart of the integrated way of working in Kent.

1. **Identifying Need and Kent Family Support Framework**

EHPS focus on working in partnership as part of a **whole system** approach to delivering support to families and children.

Individual and family work is arranged according to the Kent Safeguarding Children’s Board (KSCB) Inter-Agency Threshold Guidance levels of need. The four levels of need are ***Universal, Additional, Intensive and Specialist*.** The response is delivered by partners, SCS or EHPS, according to appropriate application of the KSCB inter-agency threshold guidance.

|  |
| --- |
| **Level 1: Universal - All children and families have core needs such as parenting, health and education. Children are supported by their family and in universal services to meet all their needs.**  **Services are provided to all children and families who live in the area.** |
| **Level 2: Additional - Children and families with additional needs who would benefit from or who require extra help to improve education, parenting and/or behaviour or to meet specific health or emotional needs or to improve material situation. Child’s needs can be met by universal services working together or with the addition of some targeted services**  **Services are provided on a voluntary basis** |
| **Level 3: Intensive - Vulnerable children and their families with multiple needs or whose needs are more complex. Life chances would be impaired without coordinated support. A multi-agency plan is developed with the family coordinated by a lead professional or family worker. A wide range of services, including Early Help Units or/and Children in Need services, might be involved**  **Services are provided on a voluntary basis** |
| **Level 4: Specialist - Children and/or family members are likely to suffer significant harm/ removal from home/serious and lasting impairment without the intervention of specialist services, sometimes in a statutory role.**  **Referral is to services with the power to undertake statutory non voluntary intervention and services with specialist skills** |

***Universal services*** such as schools, early years settings, Children’s Centres and Youth hubs seek to meet the needs of children, young people and families so they are happy, healthy and able to learn and develop securely. In Kent there is a good level of provision across the county. The EHPS offer is Children’s Centres, Youth hubs and outdoor education. Although available to all we aim to target those families that are most likely to require support, especially children and young people known to SCS.

Children, young people and families with ***additional needs*** are best supported by those who already work with them or in settings where they feel safe to make changes or resolve problems. This is often provided in universal settings or through targeted and outreach work to vulnerable communities or identified children and families.All EHPS staff providing open access universal provision are expected to undertake 20% of their work delivering targeted additional needs casework***.*** This is often supporting statutory SCS intervention cases or other intensive work.

Where additional support is required for children known to SCS, in the form of targeted open access support, this arrangement is agreed locally between the respective EHPS and SCS District teams and put in place swiftly to complement the support being provided by the family’s social worker. Examples of such work include a parenting course in a Children’s Centre to increase parenting skills of teenage parents or a girls group in a Youth Hub to tackle sexual exploitation, low self-esteem and self-harm issues.

For children, young people and families whose needs are ***intensive*,** a multi-agency approach or team around the family usually achieves the best outcomes. The **Kent Family Support Framework** provides a clear pathway for Notification, Screening, Assessment, Planning, Outcome Tracking and Reviewing of Early Help cases. Early Help Units in each district work with children, young people and families requiring intensive support. They work in partnership with other professionals and the family to build resilience and develop solutions to problems the family may be experiencing. There are 44 Early Help units across Kent; the number allocated to each district being dependent on demography and levels of need. Each Early Help Unit consists of five members of staff, including a Unit Leader and Senior Early Help worker, coming from varying professional backgrounds. An additional 0.5 business support officer is allocated to each unit to ensure that professionals can undertake the maximum amount of time in direct contact work with children and families.

In addition to the universal, additional and intensive work in EHPS, ***specialist level*** statutory Youth Justice and School Attendance and Inclusion work is integrated within the service. This enables the service to deliver to maximum capacity and flexibility without unnecessary transfer of cases due to circumstances rather than the needs of the young person. The model also ensures that the minimum number of professionals is involved with a young person and that good working relationships form the basis of effective practice.

It is essential that these levels are seen as being parts of a continuum of support available to meet assessed need, and at any particular point in time. Children, young people and their families have different levels of need and their needs change over time depending on their circumstances. Most children are able to go through their childhood needing only the support of their family, their community, their school and other universal services to which all children are entitled. Some children and families need ongoing support, while others may have their needs met sufficiently through an early intervention delivered within the universal level. Children, young people and families will not necessarily move systematically between the three levels. Occasionally a presenting concern or issue raised by a professional within the universal level will be so serious that it requires statutory or complex specialist assessment and intervention at the ‘Specialist’ level.

To ensure families receive the appropriate support at the right level, all staff in EHPS will undertake a rolling cycle of training on all aspects of safeguarding including child sexual exploitation (CSE), radicalisation and Prevent, online safeguarding and female genital mutilation (FGM), to ensure knowledge is up to date, and use of the associated toolkits and risk assessments is understood and embedded into practice.

1. **Kent’s Early Help and Preventative Service Vision and Outcomes**

**The vision of the Early Help and Preventative Services (EHPS) is that every child and young person, from pre-birth to age 25, and their family, who needs early help services will receive them in a timely and responsive way, so that they are safeguarded, their educational, social and emotional needs are met and they achieve good outcomes. The service works to ensure that children and young people contribute positively to their communities and are actively engaged in learning and employment to achieve adult wellbeing and independence.**

The intention is to make a significant difference through early help and preventative work, to prevent the escalation of needs wherever possible, and to reduce the likelihood of problems emerging in the first place.

**Children, young people and families should be able to access the right services at the right time in the right place.** We aim to place them at the heart of everything we do, working in a more integrated way and avoiding, where possible, lack of coordination or wasteful duplication.

EHPS aims to target early help services for the most vulnerable children, young people and families with complex needs who require additional and intensive support, with a focus on delivering better outcomes. The service will also make a significant difference in reducing demand for statutory SCS and to help step-down SCS cases where it is safe to do so.

The three year plan is focused on achieving the following **key strategic priorities** for children and young people, outlined in the ***Education and Young People’s Services strategic document: Vision and Priorities for Improvement:***

* Reduce the need for statutory social care and provide more effective support for children and young people on the edge of care so that there are fewer numbers of children in care, child protection cases and children in need
* Increase the numbers of children and young people who are stepped down safely from social care and who are not re-referred
* Increase the use of the Kent Family Support Framework, and achieve more successful outcomes as a result of Early Help interventions
* Reduce the days lost to education through exclusions and absence, and in the number of permanent exclusions and rates of persistent absence from school
* Reduce youth crime, re-offending and anti-social behaviour
* Reduce the number of young people who are NEET, (not in education, employment or training) and improve their participation in learning and training to age 18
* Improve readiness for school by vulnerable children at age 5
* Improve the participation of young people in 14-19 vocational pathways including increased take up of employment with training, apprenticeships and traineeships by vulnerable groups
* Reduce substance misuse and teenage pregnancy
* Increase breast feeding and reduce smoking by pregnant women and mothers
* Improve the resilience and well-being for children and young people and reduce mental and behavioural problems and the high levels of demand for CAMHS services.

**6. The Strategy and Three Year Plan: Our Key Strategic Principles and Work Strands**

**Kent’s Strategy and Three Year Plan for EHPS draws together evidence over the last year of early help and preventative work in Kent. It also draws on national policy, research and evidence of practice with the most promising outcomes. The strategy is underpinned by four principles**, that we believe impact on best practice, which run throughout all service delivery and **four work strands** which provide a priority work focus for the next three years and aim to achieve our strategic vision and outcomes.

These key principles are underpinned by a comprehensive workforce development programme for staff within EHPS, to ensure that they are skilled and confident in delivering a quality service across all four work strands. The work of EHPS staff is supported by around 1500 volunteers who give their time to improve outcomes for children and young people. A new volunteer strategy will be developed to ensure a more structured, systematic approach to how EHPS deploys and supports its volunteer workforce.

It is recognised that many areas of work within children and young people’s services across the partnership and indeed wider services across the county contribute to early help and preventative work. For example good education provision is a universal service which plays a critical part in preventing problems and poor outcomes for children and young people. Equally, safe environments and community initiatives impact on the resilience of communities and families. The scope of this three year plan is focused on the work delivered and commissioned by Kent County Council (KCC) and the interface with partners.

**Key Principles**

**We involve children, young people and families**

**We strive to improve life chances and build family resilience by using the strengths of families**

**Decisions are informed by professional judgement and the working relationship with the child and family**

**We ensure that all service delivery and commissioned provision is outcome-focused and informed by evidence-based practice, performance data and evaluation**

Each of these **four principles** underpins and informs all service delivery as described below.

1. We **involve children, young people and families** in all of our work. They often offer the solution to many of the challenges that families and communities experience and we want to engage them in developing the way we work. Where possible work is co-produced and we encourage participation in community involvement. We listen to children and young people and understand their concerns. We take children and young people’s views on their families’ difficulties into account, assessments and plans are shared with families and feedback about our services is sought. Young people learn from other young positive role models and we promote opportunities for positive learning from each other.
2. We endeavour to **improve life chances and build family resilience by using the strengths of families** to help themselves develop an intergenerational cycle of positive parenting and wellbeing that benefits all, whilst being cost effective and reducing future re-referrals to either EHPS or SCS. We promote independence rather than reliance on services and promote resilience in our communities to support vulnerable families. We focus on our most vulnerable children and young people, who often have complex and multiple needs.

We will ensure all Children’s Centres and Youth Hubs reach vulnerable families. They will make good provision for children, young people and their families and effectively support them to achieve good outcomes. They will identify where additional work is required and if needs escalate to ensure that relevant safeguarding and risk management action is taken.

We ensure that our services are accessible, equal and fair to all. Practice promotes solutions and uses peer and community influence to affect positive change. Casework is not closed for non-engagement; instead consideration is given about what else we can do and work takes place with our partners to maximise opportunities and support.

1. We develop a range ofaccessible, effective, integrated EHPSwhich build on **professional judgement and the working relationships with families** which are central to achieving sustained positive outcomes. Cases are not closed and relationships changed based on bureaucratic service requirements or structures. Rather we use professional judgement to make decisions when circumstances for a family change. Families, children and young people receive support from as few professionals as possible, to avoid unhelpful duplication, and there is continuity of worker wherever possible. We aim to ensure families do not need to move around the system and in and out of different services or experience lengthy waiting times.

Practitioners are skilled and able to work in a flexible way. Partners work together, services complement each other, are informed about each other’s work and understand interdependencies and dependencies. We promote flexibility in our approach and avoid duplication or moving people round a system. Some complex and specialist lead areas are required but we ensure integration of services wherever possible.

1. We ensure that all service delivery and commissioned provision is **outcome focused and informed by** **evidence based practice, performance data and evaluation.** Knowing what works for which family when and why, is a key element underlying this three year plan and essential in responding to the individual needs of children and families. We will ensure that we understand the dependencies and interdependencies across services and that safe and effective practice, evidenced through timely and accurate case recording, runs throughout all early help and preventative work.

We track outcomes for children and families against recognised frameworks to ensure the service is delivered in a timely and effective manner. We organise and design our services according to need to ensure equity of service. Reflective practice and a range of tools are used to bring clarity, together with structured review processes to ensure there is no case drift. Evaluating and reviewing our EHPS is central to the next phase of our work.

**Key Work Strands**

**Ensure a whole system partnership approach across the range of Early Help and Preventative services in Kent**

**Develop effective family focused practice approaches**

**Support good health and emotional well-being**

**Promote educational and vocational achievement**

We have identified **four key priority work strands** that are essential if we are to achieve good outcomes for children and young people over the next three years. They stand alongside and contribute to the core business of Kent’s EHPS, and provide an additional focus to service delivery.

1. **A whole system partnership approach across the range of EHPS in Kent is essential if we are to ensure that needs are identified and addressed before problems become more established and that outcomes are achieved.** This includes early identification and good information sharing systems. It is more difficult to change if families have broken down or if they have become involved in youth crime, dropped out of school or developed a mental health problem. The system relies on early identification, good information and effective utilisation of services being in place in order to respond to a referral in a timely way and ensure a fast response leading to an agreed intervention.

***We will:***

1. Develop and embed an agreed charter with schools with a clear definition of roles, responsibilities and expected service standards that include timeliness of feedback and effective communication
2. Work with the Police to reduce the number of first time entrants into the criminal justice system by increasing the number of community resolutions and providing an intervention that ensures that concerns do not escalate
3. Work closely, and align our targets and resources with, the new Local District Partnership Groups to ensure that we allocate our resources effectively to focus on locally agreed outcomes
4. Improve early identification and response to need by increasing the number of families receiving early help support as a result of discussion between the Central Duty Team and Triage, or between district based SCS staff and EHPS staff when a case has been closed with no further action following a statutory assessment.
5. **A family focused approach underpins all our work. All work is family based or is otherwise clearly defined (e.g. youth work, education, adolescent transition to adulthood). We will develop our models of practice to inform our work in Children’s Centres, youth hubs, youth justice, attendance and inclusion or intensive work in Early Help Units.**

The focus is on preventing people’s needs escalating and/or helping people receive and exit statutory services rapidly. All practitioners focus on the child and the family and the wider setting, taking a systemic approach to understanding the family needs that lead to a plan agreed and shared with all relevant family members and other professionals.

Our intensive casework practice is aligned to SCS and we set clear expectations about thresholds and apply a consistent approach to assessment, planning, reviews and quality assurance. Our written work is clear and does not use jargon. We share our work with families and are clear with them about the support we can provide, the concerns we may have and what needs to change to make things better for children and young people.

Assessments across the service are based on historical information, facts and new information as it comes to light. The assessment of need always informs the plan for support which is regularly monitored and reviewed. All delays to accessing services are reduced and work is always timely and meaningful to families. Throughput of cases is not rigid. The needs of the individual child and the family are taken into account and consideration is given to ongoing support where it is required. Intensive casework is closed when outcomes are achieved and good sustainability and exit plans are in place. There is no drift in the throughput of cases. ***The principle of the client and worker relationship informing professional judgement and decision making is always used.***

***We will:***

1. Develop Systemic Practice by ensuring that all staff understand the theory and principles and that Unit Leaders have been trained to embed the practice into the work of their staff
2. Integrate Troubled Families work and indicators into the additional and intensive support offered by EHPS to develop a more sustainable model of family support that turns around the lives of more families experiencing challenging circumstances
3. Adopt the Signs of Safety approach and train staff in its use so that a common methodology and language is used across SCS and EHPS
4. Ensure that the importance of parents and carers, especially fathers, is captured in all work. This includes their involvement in assessment and plans as well as the design and development of services
5. **Good health and emotional wellbeing are essential to being life ready. We will co-ordinate our health services so that we get a more integrated approach with health visitors, school nurses, CAMHS and substance misuse and sexual health workers who all have a role in providing early help.**

***We will****:*

1. Undertake joint commissioning with Public Health to improve the reach and effectiveness of services
2. Embed mental health professionals into our EHPS to ensure swift and early access to support for service users as well and professional advice, guidance and support for workers who are supporting families where there are emotional health and wellbeing concerns
3. Work with public health and schools to promote healthy lifestyles to reduce the number of children who are overweight or miss school because of health needs
4. **We promote high aspirations, leading to greater independence and future life opportunities. Educational achievement, training and employment are paramount to life chances.**

Underpinning all that we do is a positive transition to adulthood and promoting independence through education, training and employment wherever possible.

Involvement in play, youth participation and a wide range of positive and adventurous activities provides transformational opportunities that can increase aspiration, enhance motivation, self-worth and learning. Engagement in opportunities is promoted by workers and support is given to ensure they are particularly accessed by vulnerable children, young people and families. We will deliver a youth offer and programmes of support for vulnerable children and adolescents that increase participation in positive activities and reduce offending, anti-social behaviour, teenage pregnancy, drug and alcohol misuse and youth unemployment. Continuity of support is available through community and universal opportunities when required and children with complex needs will be supported to access these opportunities

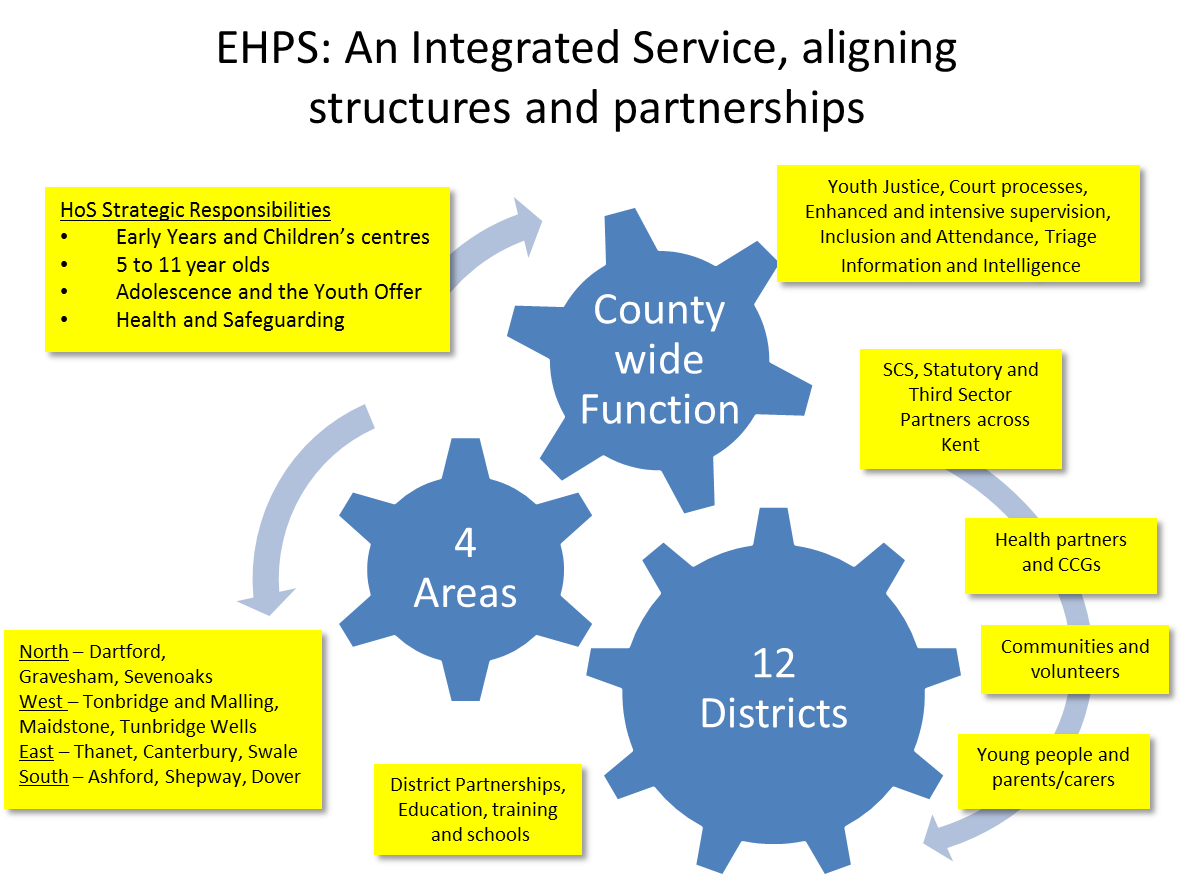
***We will:***

1. Use Children’s Centres to improve the take-up of free early education places by eligible two year olds to ensure that more disadvantaged children develop well and are school ready
2. Ensure that school attendance and involvement in education, employment and training are considered in all assessments and that, where relevant, activities to address them are included in plans
3. Through all of our EHPS teams, but especially the Pupil Referral Units (PRU), Inclusion and Attendance service, work closely with schools to improve attendance, reduce exclusions and ensure swift re-integration from PRUs into mainstream education though supporting schools with managing behaviour and attendance
4. Deliver a youth offer and programmes of support for vulnerable children and adolescents that increase participation in positive activities and reduce offending, anti-social behaviour, teenage pregnancy, drug and alcohol misuse and youth unemployment
5. Ensure that PRU work with a range of services to support young people into individualised pathways of education and training
6. Work in partnership with the Skills and Employability service to ensure appropriate access to traineeships and apprenticeships for young people.
7. **Overview of Kent Early Help and Preventative Services**

Kent’s EHPS provide opportunities and support to children, young people and families across the range of safeguarding and well-being levels to help improve outcomes at the earliest possible stage; and as a step down from SCS to maintain and support achievements made whilst statutory social care was involved.

There are a wide range of services provided to vulnerable children, young people and families with multiple problems and disadvantages, under the umbrella of the EHPS. These services include Youth Services, Children’s Centres, Kent Troubled Families Programme, Family Support and the PRU, Attendance and Inclusion service.

The EHPS Division is organised and delivered in four geographical areas that align with the SCS area structure and other services within the Education and Young People’s Services Directorate. The operational delivery of EHPS is managed in 12 Districts (each Area includes three Districts).



**Early Help Units**

Early Help Units (EHU) are in place in each District to deliver intensive support for children, young people and families who have an Early Help assessment and plan. They promote working together in small teams with high levels of responsibility and autonomy, to promote a culture of challenge and respect with an opportunity to learn from what went well, and what did not.

The EHU undertakes casework with a range of families requiring early help support. These cases include out of court disposals, step-downs from SCS or prevention of the need for statutory social care intervention, children and young people experiencing attendance or behaviour difficulties at school or older young people who are NEET. Casework also includes additional support, where necessary, for children in need, children with a child protection plan and children and young people in the care system.

The EHU works closely with open access services to ensure an integrated approach. Families supported by targeted casework in the units can also benefit from open access support, and ongoing engagement with open access services will support the case closure in the units once outcomes have been achieved.

Both the EHU and open access services have a critical link with commissioned services in order to ensure an appropriate district, multi-agency response to need. Ongoing monitoring and evaluation takes place to ensure that KCC and commissioned services are appropriately meeting the needs of those children, young people and families in need of early help services.

**Open Access: Children’s Centres and Youth Work**

The work delivered through open access Children’s Centres, youth hubs and other settings is critical to achieving positive outcomes for children, young people and their families, and incorporates a range of key services.

Targeted work in open access settings ensures greater prevention as early as possible to ensure well-being for all. It is also essential as part of the support package for the cases stepped down from SCS and to ensure improvements are maintained without the necessity for long term casework.

This delivery model ensures continuity between targeted and open access work in order to fully utilise the opportunities available for vulnerable children and young people. It maximises the full use of group work experiences to assess and improve the well-being of families so they do not slip through the system, problems do not escalate and referrals are not made to SCS.

Children’s Centres continue to provide their core offer, as required by Ofsted, which is to improve outcomes for young children and their families, with a particular focus on those in greatest need. They work to make sure all children are properly prepared for school, regardless of background or family circumstances. They also offer support to parents. Public Health is a critical partner for Children’s Centres.

Children’s Centres are subject to Ofsted inspection and must operate in line with the Ofsted framework, with a key focus on:

* Access to services by young children and their families
* The quality and impact of practice and services
* The effectiveness of leadership, governance and management

Youth Work promotes the personal, social and educational development of young people, and enables them to develop their voice, influence and place in society and to reach their full potential.

Youth Work is based on the needs of young people. It is critical that:

* Young people are central to the planning and delivery of youth work
* Young people choose to be involved (voluntary commitment)
* Youth workers value young people for who they are now
* Youth Work is founded on a relational and associational way of working with young people
* Youth Work recognises young people as a partner in the learning process
* Youth Work complements formal education, promoting young people’s access to learning opportunities which enables them to fulfil their potential

A key benefit of integrating Youth Work and Children’s Centres in the same service is that we can identify and build synergies between them as they work together more closely to provide open access services, in terms of sharing buildings, outreach vehicles, and integrated work with families known across both services such as teenage parents.

**Troubled Families**

The Kent Troubled Families Programme began a new five year second Phase in January 2015. It now has a wider set of criteria that means most children, young people and families who come to the attention of EHPS for targeted support are likely to be included in the programme. This means that the focus and outcomes of the Troubled Families Programme is a fundamental part of everyone’s role.

In addition to this, a dedicated team of project staff and analysts will continue to validate families for inclusion in the programme against the criteria. This will involve tracking the data on identified families, verifying and documenting the turned around claims submitted to the Department for Communities and Local Government (DCLG), supporting the Governance from the DCLG, KCC and Kent partners and contract managing the countywide commissioned services and projects.   
  
**Youth Justice**

The Youth Justice Service is responsible for assessing, planning and intervening with the 10-17 age group who have come to the attention of the Police and receive either an out of court disposal or a sentence. Ten years is the age of criminal responsibility and 18 years is when the majority of those subject to statutory supervision transfer to either the National Probation Service or the Community Rehabilitation Company which is responsible for working with adult offenders.

The principal aim of the Youth Justice System is to prevent offending by children and young people.

In addition to its statutory duties, the Youth Justice Service also:

* Fulfills duties to victims of youth crime, including informing them of the progress of the offender’s case and providing information about appropriate services if they ask for additional support
* Provides restorative justice opportunities for both victims and offenders to assist with bringing closure to the conflict between them and to identify how the child or young person may repair the harm they have caused

Youth Justice is now embedded across the work of EHPS. The central Youth Justice Service focuses on court disposals, and the EHU focus on out of court disposals. However, a core principle of EHPS is that children and young people should have the stability of a case worker wherever possible as a high-quality relationship supports positive outcomes. If a young person becomes known to the Youth Justice Service and they already have an Early Help Worker, a discussion will take place to see whether that worker can continue to support that young person, including undertaking the statutory youth justice work, depending on the severity of the offence and disposal.  
  
  
  
**PRU, Inclusion and Attendance**

Forming an integrated part of EHPS, the PRU, Inclusion and Attendance service has adopted a new approach of intervening early and providing timely support to schools, children and families to address the issues of behaviour, attendance and exclusion. The Area Attendance and Inclusion Lead Officers work in partnership with schools to prevent exclusion where appropriate and to re-integrate excluded pupils with effective support. Working closely with practitioners both in EHPS and external partners, the service will work to empower schools to manage absenteeism and exclusion more effectively.

The newly restructured PRU, Inclusion and Attendance service complements the activities of EHUs by:

* Providing an integrated inclusion and attendance service that provides dedicated officers for engaging with schools in an advisory and empowering manner. They carry out group and project work with schools to improve attendance and to avoid exclusions.
* Acting as the interface between EHU and schools by working closely with Early Help Workers in the Units. It is essential that effective attendance and inclusion support and advice is available to Unit staff as required.
* Managing enforcement work centrally for Education Supervision Orders, Penalty Notices and Prosecution.
* Providing an outreach service that supports the attendance, education achievement and welfare of children from Gypsy, Roma, Traveler and Minority Ethnic backgrounds.
* Working with Pupil Referral Units to empower home schools to deliver their statutory duties for pupils with challenging behaviour or medical conditions while providing high quality services for pupils who are placed in a PRU.

1. **Progress in 2014-15**

In the last year, EHPS has focused on redefining and clarifying its strategy and shared values and implementing the structures and systems that will allow the division to achieve its outcomes over the next three years.

During the past year we have:

* **Developed a clear brand for Early Help and Preventative Services**. EHPS brought together a range of disparate services, some of which had been developed in isolation, from different directorates. We have worked with partners to understand their expectations, define our offer and determine how to deliver it most efficiently and effectively.
* **Implemented a new integrated structure that is more closely aligned to our partners in schools and Specialist Children’s Services, better reflects the needs of children, young people and families and is more cost effective**. During the past year all staff were involved in a consultation that led to a restructure that simplified and rationalised job titles, descriptions and roles and moved to a District based, whole family approach with integrated support from specialist teams. The Troubled Families programme became part of the service and achieved their Phase 1 target of turning around 2,560 families. The new structure has resulted in better use of resources coupled with joint planning and delivery, and achieved efficiency savings of £7.1 million.
* **Established Triage, a single front door for referrals related to families requiring early help support.** Triage was co-located with the Central Duty Team in August 2015 to improve joint working with SCS, to ensure a ‘no wrong door’ approach and to contribute to our goal of ensuring the consistent application of safeguarding thresholds and service allocation across the county. Early Help notifications are received and assessed by Triage.
* **Clarified the procedures, processes and routines that we use to access and deliver services to improve integrated working and enable both staff and partners to understand how they work together**. Effective service integration requires staff to understand not only their own role but also how it links with others’, both in and outside the service. Service pathways and standards have been agreed and published. The **Kent Family Support Framework** embeds an outcome focused cycle of effective practice from early identification of a problem and notification to EHPS through to assessment, planning and review. The Signs of Safety approach has been has been adopted jointly with SCS to ensure that there is a consistent language around safeguarding and family practice approaches. There are clear boundaries, but also agreed overlap, between Early Help Unit and open access work which is coordinated through fortnightly District meetings that are also attended by PRU, Inclusion and Attendance and Safer Young Kent staff.
  + We have ensured **safe Step Down processes from Specialist Children’s services** to Early Help Units. Jointly agreed procedures and processes are in place and improved arrangements have resulted in increasing proportions of the cases closed to SCS are stepped down to EHPS. Weekly step down panels are established throughout the county and there is sustained commitment across SCS and EHPS to these panels to discuss complex cases and monitor the outcomes for step down cases. The chart below demonstrates the impact that working together in the West of the County has had on reducing demand in SCS
* **Ensured the transition to a data-informed service with continuous improvement embedded in the way it operates.** A separate Information and Intelligence service has been established with the function of gathering data and supporting operational staff to achieve improved outcomes and to drive advances in efficiency and effectiveness. A casework tracker tool has been developed which allows the service to have greater visibility of workloads and progress towards achieving outcomes in casework. Key performance measures are now reviewed regularly at District, area and divisional level meetings and used to inform service developments.

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| * We have conducted a series of **practice reviews of Children's Centres**, the results of which are shaping our planning to continue the improvement journey for centres in Kent and to ensure greater consistency across Districts. The Ofsted Inspection of Maidstone Children’s Centres conducted in June 2015 achieved a judgement in all categories of Good. This is a significant achievement by managers and staff in improving standards from an Ofsted judgement of Inadequate in June 2014 to Good in June 2015. The inspection found that “Significant progress has been made since the last inspection to improve the quality and range of services provided for families” and that “Leaders and managers, and those responsible for governance, have thoroughly reviewed the organisation of the centres and the management structure. As a result, services have a consistently positive impact on families who access the centres and highly effective working arrangements with other services and organisations within the Maidstone area mean families receive professional help quickly (from) Centre leaders and staff (who) are highly motivated and dedicated to their role”. |

**In 2014-15 our key performance indicators showed**:

* 69% of cases were closed with positive outcomes, based on cases closed under the Kent Family Support Framework (KFSF). This was a reduction on the previous year’s figure of 74%, although the two aren’t directly comparable as the previous figure was under the Common Assessment Framework.
* 22% of cases closed in SCS were stepped down to EHPS, an increase on the previous year’s figure of 18%. This was due to an increased focus in this area as a result of the 0-25 transformation programme. This will be rolled out fully in 2015-16 and should ensure further increases.
* 97% of Early Help notifications under the KFSF led to an assessment. This figure is higher than it should be and is expected to drop once clear internal thresholds for targeted casework, targeted open access and open access are agreed and implemented.
* 59% of family plans were in place within four weeks of assessment. As the KFSF was only launched in September 2014 there are no comparable figures for the previous year. However, this figure fluctuated during early 2015 due to the impact of restructure, and should rise going forward.
* The percentage of re-referrals to SCS within twelve months of a previous referral was 28.5%, above the target level of 25%. The roll out of the 0-25 transformation in both SCS and EHPS should bring this figure down in 2015-16.
* 80% of children under five living in the 30% most deprived Super Lower Output Areas (LSOA) are registered with a Children's Centre, which is appropriately high, though only 47% are currently attending. This figure should be at least 65% and will be an area of focus moving forward.
* 75% of children under five with current SCS involvement are known to a Children Centre. This shows the close working relationship between EHPS and SCS, and Children’s Centres are using monthly lists to work with SCS and families to ensure this figure continues to rise.
* 72% of Children’s Centres were judged to be good or outstanding by Ofsted, above the national figure of 67%. These figures combine inspection results under the old and new framework.
* The number of first time entrants into the Youth Justice system fell to 587, which meant that the target of 628 was achieved by a significant margin.
* The percentage of the 16-18 cohort that were NEET at the end of January (the agreed outturn point for the year due to stability) was 5.2%. This was above the target of 4%, and above the national figure of 4.7%. Work is taking place to integrate working across a number of teams and services to ensure this figure can be reduced going forward.
* The latest data on attendance is not for a full school year. Available early data which combine autumn 2014 and spring 2015 figures indicates a persistent absence figure for primary schools of 2.8%, up from 2.3% last academic year. The available figure for secondary schools is 6.1%, down from 6.2% last academic year. National persistent absence figures for 2013-14 were 2.1% for primary and 5.2% for secondary, showing that Kent has higher rates of absence than national.
* The DfE is changing the definition of persistent absence to 10% from the current 15%. This is being implemented from September 2015 and will have a significant impact on persistent absence reporting. The combined autumn and spring figures for 2014-15 increase from 2.8% to 8.5% for primary schools using the new threshold, and from 6.1% to 14.0% for secondary schools. National figures are not yet available for this new threshold. Kent is setting provisional targets for the 10% threshold based on this early data.
* There were 1693 fixed term exclusions and 47 permanent exclusions in the Primary phase. This compares to figures for the end of the previous academic year of 1604 and 26, which is a significant and concerning increase for both indicators. Further work is taking place to understand and address this increase in the primary phase, which has not been mirrored in the secondary phase.
* There were 9030 fixed term exclusions and 58 permanent exclusions in the Secondary phase. This compares to figures for the end of the previous academic year of 8912 and 61.

**9. Performance and Targets 2015-2018**

We aim to ensure we achieve the following:

* A reduction down to 20% in the rate of re-referrals to either EHPS or SCS within 12 months of case closure by EHPS by 2018.
* An increase in the percentage of step-downs to EHPS of up to 26% by 2018, by working with SCS.
* A reduction in the number of notifications leading to assessment down to 65% by 2018, by ensuring the provision of appropriate levels of early help to children, young people and their families.
* All our Children’s Centres will be judged good or outstanding by Ofsted, will make good provision for children aged 0-5 and their families and effectively reach and support vulnerable families to achieve good outcomes. Over 90% of targeted families will be registered with a Children’s Centre and over 75% of those families will be engage in Centre activities.
* All our Children’s Centres play a key role in increasing the take-up of free early education places by eligible two year olds to ensure more disadvantaged children develop well in the early years. By 2018 the take up of the free place by eligible 2 year olds will improve to 90%.
* An increase in the timeliness of response for targeted casework to ensure that by 2018 95% of plans are in place within 4 weeks of notification.
* An increase the number of cases closed with a positive outcome up to 86% by 2018.
* A reduction down to 1% by 2018 in the percentage of young people aged 16-18 who are NEET, by working in an integrated way with all services involved with young people, informed by a newly developed NEET strategy.
* Continued reduction in the number of first time entrants into the Youth Justice system, together with a reduction in the re-offending rate, by working with the Police to increase the use of out-of-court disposals, particularly community resolutions.
* By working with services across Education and Young People’s Services, an increase in the education participation levels of young offenders, to ensure that by 2018, 86% of those who are statutory school age receive full time education and 85% of those aged 16 and 17 are in education, employment and training.
* Integration of the delivery of the Troubled Families Programme into EHPS to ensure that high numbers of families are ‘turned around’, up to 4964 by 2018, which equates to 55% of the target cohort of 8960 families.
* Improved attendance of children and young people by supporting the reduction of persistent absence to 1.8% in Primary and 4.3% in Secondary schools by 2018.
* Ensuring that with the implementation of new models for PRU provision there will be no more than 20 pupils permanently excluded from school by 2018.
* By working with schools on behaviour management strategies and monitoring, to reduce the levels of fixed term exclusions down to 1050 in Primary schools (27% reduction) and 5000 in Secondary schools (45% reduction) by 2018.

**10. Getting There**

In order to bring about these improvements we willdeliver effective and well-targeted support for children and families, and quality whole family support and ways of working, based on the key principles and work strands.

A Quality Assurance Framework is in place to ensure all work is of the highest quality and to provide analysis of the effectiveness of EHPS and value for money. The Framework has four interlinking elements.

* Performance data and quantitative information
* Case work audits and qualitative information
* Feedback from staff, partners, children, young people and families
* Staff competence and wellbeing

The monthly EHPS data and performance scorecard provides throughput and outcome data across the service and this will additionally inform service improvements and developments.

The Education and Young People’s Services Directorate is also undertaking work on priority schools and vulnerable pupils and the EHPS Three Year Plan complements and is informed by this work.

The three year plan outlines key actions against the strategic priorities and work strands. It will be reviewed on a quarterly basis and amendments made if required.

The table below outlines our key performance indicators for the service, and shows our performance in 2015 and our targets up to 2018. We also monitor a suite of activity indicators that do not have targets associated with them.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Indicator** | **Actual**  **2015** | **Target**  **2015** | **Target**  **2016** | **Target**  **2017** | **Target**  **2018** |
| Percentage of Early Help cases stepped up to Specialist Children's Services | 9.4 | 7 | 6 | 5 | 4 |
| Percentage of Specialist Children's Services cases stepped down to Early Help | 22 | 20 | 22 | 24 | 26 |
| Percentage of notifications leading to an assessment | 97 |  | 75 | 70 | 65 |
| Percentage of plans in place within 4 weeks of notification | 59 |  | 80 | 87 | 95 |
| Percentage of cases closed with a positive outcome | 69 |  | 80 | 83 | 86 |
| Percentage of closed cases that are referred to EHPS or SCS within 12 months |  |  | 25 | 22 | 20 |
| Percentage of 16-18 cohort that are NEET | 5.2 | 4.0 | 3.5 | 1.0 | 1.0 |
| Percentage of Children's Centres with Good or Outstanding Ofsted Judgements | 72 | 75 | 81 | 90 | 100 |
| Percentage of eligible children taking up FF2 place (as measured by DfE snapshot) | 58 |  | 70 | 75 | 80 |
| Percentage of 0-5 living in the 30% most deprived  LSOAs registered with a Children's Centre | 80 |  | 84 | 88 | 92 |
| Percentage of 0-5 living in the 30% most deprived LSOAs attending a Children's Centre | 47 |  | 65 | 68 | 71 |
| Percentage of 0-5 with Current Social Services involvement known to a Children Centre | 75 |  | 80 | 85 | 90 |
| Percentage of 14-18 with Current SCS involvement known to the Youth Service |  |  | 60 | 65 | 70 |
| Number of first time entrants to the youth justice system | 587 | 628 | 615 | 602 | 589 |
| Rate of re-offending by CYP | 35.5 | 30 | 29 | 28 | 27 |
| Percentage of young offenders of school age in full time education (25 hours) | 76.6 | 83 | 84 | 85 | 86 |
| Percentage of young offenders post statutory school age in full time EET (16 hours) | 50.9 | 80 | 81 | 82 | 85 |
| Cumulative number of Troubled Families ‘turned around' in Phase 2 |  |  | 1075 | 2688 | 4964 |
| Percentage of pupils who are persistently absent from primary schools - all pupils (10% threshold) *provisional data/targets* | *8.5* |  | *8.0* | *7.5* | *7.0* |
| Percentage of pupils who are persistently absent from secondary schools - all pupils (10% threshold) *provisional data/targets* | *14.0* |  | *12.5* | *11.0* | *10.0* |
| Number of permanent exclusions from the primary phase - all pupils | 48 | 11 | 8 | 6 | 5 |
| Number of permanent exclusions from the secondary phase - all pupils | 61 | 39 | 32 | 24 | 15 |
| Number of fixed term exclusions from the primary phase - all pupils | 1669 | 1350 | 1250 | 1150 | 1050 |
| Number of fixed term exclusions from the secondary phase - all pupils | 8874 | 8000 | 7000 | 6000 | 5000 |